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# Form **990-PF**

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

2009

For	calend	lar year 2009, or tax year beginning		<u> </u>	, and e	nding		
G	Check a	all that apply: Initial return Amended return		Initial return of a fo		· '	Final return	
Us	e the IF	Name of foundation		// Address chang	_		A Employer identification	number
	label. herwise	ANGEL FUND FOUNDATION	N IN	iC.			65-1155198	
•	print	Number and street (or P O box number if mail is no			. "	Room/suite	B Telephone number	
	r type.						(561)207-2	001
	Speci	I GIV OF IOWIL STATE, AND ZIP CODE		<del></del>			C If exemption application is p	ending, check here
ins	truction	W PALM BEACH, FL 33	401				D 1 Foreign organizations	s, check here
Н	Check t	type of organization: X Section 501(c)(3	exempt p	private foundation			<ol> <li>Foreign organizations me check here and attach co</li> </ol>	eting the 85% test,
	Sect	tion 4947(a)(1) nonexempt charitable trust	Other t	taxable private founda	tion		E If private foundation sta	
1 F	aır mar	ket value of all assets at end of year   J   Accou	ntıng met	thod: X Cash	Accr	ual	under section 507(b)(1)	
(f	rom Pa	art II, col (c), line 16)	Other (sp				F If the foundation is in a	60-month termination
	<u> </u>	631,122. (Part I, c	olumn (d	) must be on cash t	asis)		under section 507(b)(1)	(B), check here
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	ex	a) Revenue and openses per books	( <b>b)</b> Net in		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
2	1 (	Contributions, gifts, grants, etc., received		3,000.				
		Check 🕨 🗶 if the foundation is not required to attach Sch. 8						
	3 ;	Interest on savings and temporary cash investments		1.		1.		STATEMENT 1
	4 [	Dividends and interest from securities	ļ	9,639.		<u>9,639.</u>	9,639.	STATEMENT 2
j	5a (	Gross rents	ļ		· · · · · · · · · · · · · · · · · · ·			
	bı	Net rental income or (loss)						
<b>S</b> e	6a :	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	ļ	-19,513.				
Revenue	b }	assets on line 6a 39,319	-					
ر 20	7 9	Capital gain net income (from Part IV, line 2)		<del></del>		0.		<u> </u>
	1	Net short-term capital gain Income modifications RECEIVE	<b>D</b>	1			0.	
	1 - 7			<i>S</i> /				
	1 .	and allowances		위 -				
	1	Gross profit or (loss)		<del>8</del> /				
		Other income		-		<del> </del>		
	12	Total Add lines 1 through 11 OGDEN.	41	-6,873.		9,640.	9,640.	
		Compensation of officers, directors, trustees, etc		0.		0.	0.	0.
	14	Other employee salaries and wages						
		Pension plans, employee benefits						
808	16a i	Legal fees						
Expenses	b A	Accounting fees STMT 3		1 <u>,250</u> .		625.	0.	0.
Ä	[ c	Other professional fees						
ž.	17	Interest	<u> </u>					
100	18	Taxes STMT 4		791.		294.	0.	0.
i.c.	19	Depreciation and depletion						
Ē	20	Occupancy	-				1	
Ā	21	Travel, conferences, and meetings	-					ļ
2	22	Printing and publications		A A E O		/ ADE	0.	
Operating and Administrative	23	Other expenses STMT 5		4,458.		4,425.	· · · · · · · · · · · · · · · · · · ·	0.
9	24	Total operating and administrative expenses. Add lines 13 through 23		6,499.		5,344.	0.	0.
ć	25	Contributions, gifts, grants paid	-	30,500.		<i>,_</i>	"	30,500.
		Total expenses and disbursements.		20,200.				30,300.
		Add lines 24 and 25		36,999.		5,344.	l o.	30,500.
_		Subtract line 26 from line 12:		22,223.		<u>- , - ,</u>	1	
		Excess of revenue over expenses and disbursements		-43,872.				
	ļ	Net investment income (if negative, enter -0-)				4,296.		
_	1	Adjusted net income (if negative, enter -0-)					9,640.	
923								- 000 DE

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Form 990-PF (2009)

ANGEL FUND FOUNDATION INC

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

See the Part VI instructions.

		-1122			aye 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see ı	nstru	ction	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here \[ \bigcup \] and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	ļ			<u>86.</u>
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			0.
3	Add lines 1 and 2				<u>86.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				86.
6	Credits/Payments:				
a	2009 estimated tax payments and 2008 overpayment credited to 2009				
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)  6c 86.				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d			;	86.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8	1			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1			<del></del>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	1			
	art VII-A Statements Regarding Activities	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		1	Yes	No
	any political campaign?		1a		
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		"		
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		10	i	х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		16		
u					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
^	managers. > \$0.				X
Z	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				v
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	7/3	4a		
	·	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		١.		
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	<u>FL</u>				
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for calendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? It "yes," attach a schedule listing their names and addresses.	Г9	10	X	

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	rt VII-A Statements Regarding Activities (continued)		-	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► THOMAS H. HARVEY, III Telephone no. ► (561		<u> 765</u>	3
	Located at ► 1125 N FLAGLER DR., WEST PLAM BEACH, FL ZIP+4 ►	<u>33401 </u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			]
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	0		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	0		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	0		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	l l		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	0		
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	0		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  N/A	A 1b		
	Organizations relying on a current notice regarding disaster assistance check here	<u> </u>		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_		
•	before the first day of the tax year beginning in 2009?	10		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
-	defined in section 4942(j)(3) or 4942(j)(5)):			
2	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?			
	If Was I let the years			
ь.	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	A 2b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	, 20		
	•			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year?  Wes X N	.		
		10	:	
0	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
4 -	Form 4720, to determine if the foundation had excess business holdings in 2009.)  N/A			-
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	DE.	X X
		Form <b>990</b>	(	(2009)

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Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	Requirea (contin	ued)		
5a During the year did the foundation pay or incur any amount to:		Г <del></del> ]	( <del></del>		
(1). Carry on propaganda, or otherwise attempt to influence legislation (section			s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		[ <del>1</del> ].	-	
any voter registration drive?	n		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	-	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		<b>₽</b>		
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	İ	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or t		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	in Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?	-	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			
expenditure responsibility for the grant?			s 🔲 No		
If "Yes." attach the statement required by Regulations section 53 494		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			1	
a personal benefit contract?	,	Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	х
If "Yes" to 6b, file Form 8870			[		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No		
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attribute			N/A	7b	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors		nagers, Highly			•
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	unt, other wances
THOMAS H HARVEY, III	DIRECTOR				
1125 N FLAGLER DR					
WEST PALM BEACH, FL 33401	1.00	0.	0.		0.
			<del>, _,, </del>	1	
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	·	<u> </u>	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	acco	unt, other wances
NONE			<u>-</u>		
1,02,12	ĺ		1		
	1				
		·	<del> </del>	†	
44.4.4.	1				
		1	·		
	1				
Total number of other employees paid over \$50,000					. 0

Part VIII Information About Officers, Directors, Trustees, Foundation No. 12 Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONI	n .	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del></del>	
		1
-		
Total number of others receiving over \$50,000 for professional services		<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 CONTRIBUTES FUNDS TO SECTION 501(C)(3) PUBLIC CH	ARITIES.	
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		······································
3		
Total, Add lines 1 through 3	▶	0.

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	531,246.
b	Average of monthly cash balances	1b	9,725.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	540,971.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	540,971.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,115.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	532,856.
6	Minimum investment return Enter 5% of line 5	6	<u> 26,643.</u>
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5	]	
b	Income tax for 2009. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5.41.000
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Ρ	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	30,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	30,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	30,500.
	Note. The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation.	auglifiee for th	e cection

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4940(e) reduction of tax in those years.

# Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005				
c From 2006				
d From 2007				
e From 2008	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ N/A				
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line	•			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				]
d Excess from 2008				
e Excess from 2009				

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ANGEL FUND FOUNDATION INC

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year HUNGER COALITION PO BOX 1576 HAILEY, ID 83333	NONE		GENERAL OPERATING FUND	10,000.
KENAN FLAGLER BUSINESS SCHOOL FOUNDATION CAMPUS BOX 3490 CHAPEL HILL, NC 27599	NONE		GENERAL OPERATING FUND	12,500.
ST. THOMAS EPISCOPAL CHURCH P.O. BOX 1070 SUN VALLEY, ID 83353	NONE		GENERAL OPERATING FUND	8,000.
		<u> </u>		
b Approved for future payment	T		<u>▶ 3a</u>	30,500.
NONE				
			<u></u>	
Total			► 3h	Ο.

#### Part XVI-A Analysis of Income-Producing Activities

T. I	Unrelated	husiness income	Exclu	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code		code	, anount	IBNOTON MOONIO
a	·				
b	Cites   Amount   Social   Amount   function income				
<u> </u>			-		
d					·
e	-				
†	-		-		<del></del>
g Fees and contracts from government agencies			<del></del>	<del></del>	****
2 Membership dues and assessments					
3 Interest on savings and temporary cash					1
investments	<del>                                     </del>		1.4	0 630	<u> </u>
4 Dividends and interest from securities	<del>                                     </del>		14	9,039.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property	<del>                                     </del>				
b Not debt-financed property	+				
6 Net rental income or (loss) from personal					
property	1		<del> </del> -		
7 Other investment income					
8 Gain or (loss) from sales of assets other					10 512
than inventory					-19,513.
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory			<del> </del>		
11 Other revenue:					
a			1		
b	1 1	<del>,</del>	l		
6		-	<del> </del>		
d	-				
12 Subtotal. Add columns (b), (d), and (e)		0	<u> </u>	9 639	-19 512
13 Total Add line 12, columns (b), (d), and (e)	L				
(See worksheet in line 13 instructions to verify calculations.)				10	3,073.
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2a	Is the foundation directly or indirectly affiliated v	with, or related to, one or more tax-exempt or	ganizations described	
	in section 501(c) of the Code (other than sectio	n 501(c)(3)) or in section 527?		Yes X No
b	If "Yes," complete the following schedule.			
	(a) Name of organization	(b) Type of organization	on (	c) Description of relationship
	N/A			
	Under penalties of perjury, I declare that I have examined			my knowledge and belief, it is true, correct,
-	and complete Declaration of preparer (other than taxpaye		10	
	All Hay Co	2 110110	77.^	
Sign Here	Signature of officer or trustee	Date	Title	
뒨	Preparer's \$	Whi.		eck if Preparer's identifying number
흸	signature signature	Milu	11/02/10 sel	ployed
٠,		EKAERT & HOLLAND, L.	L.P.	EIN ▶
	Thirm's name (or yours CHERRY, B)  of self-employed), P.O. BOX	1999		

843-706-8440

Phone no.

address, and ZIP code

BLUFFTON, SC 29910

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY C	ASH IN	IVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
BANK OF AMERICA						1.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A				1.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM	SECUR	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		TAL GAINS VIDENDS	COLUMN (A	<b>Y</b> )
FIDELITY FIDELITY	<del>-</del>	9,634.		0.	9,6	534.
TOTAL TO FM 990-PF, PART I, L	N 4	9,639.		0.	9,6	39.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS		EST-	(C) ADJUSTED NET INCOM		
TAX PREP. FEES	1,250.		625.		0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,250.		625.		0.	0.
FORM 990-PF	TAX	ES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	EST-	(C) ADJUSTED NET INCOM		
INCOME TAXES	791.		294.		0.	0.
TO FORM 990-PF, PG 1, LN 18	791.	-	294.		0.	0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	PENSES NET INVEST- ADJUS			
INVESTMENT MANAGEMENT FEES BANK CHARGES	4,425.	4,42	25. 0.	0.	0.
TO FORM 990-PF, PG 1, LN 23	4,458.	4,42	25.	0.	0.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUNI	D BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
TIMING DIFFEREENCES IN NET AS STATEMENTS	SETS OF THE	BROKERAGE		2	18.
TOTAL TO FORM 990-PF, PART II	II, LINE 3			2	18.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	Т
1255 ISHARES TRUST 2900 M.S EMERGING MARKETS 2380 S&P 500			54,966. 37,524. 280,811.		13.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		373,301.	374,4	14.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	8
	VA	LUATION		FAIR MARKE	T
DESCRIPTION	М	ETHOD	BOOK VALUE	VALUE	
DESCRIPTION  THIRD AVE INTL VALUE FIDELITY TAX FREE MM FUND			277,661. 9,076.	VALUE 234,8 9,0	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	9
NAME OF CONTRIBUTOR	ADDRESS		
THOMAS H HARVEY, III	1125 N FLAGLER DR. W PALM BEACH, FL 33401		

#### Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

	The a separate application for each retain.		<u></u>			
<ul><li>If you a</li></ul>	re filing for an <b>Automatic 3-Month Extension, complete only Part I</b> and check this box re filing for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> (on page 2 of this <b>omplete Part II unless</b> you have already been granted an automatic 3-month extension on a previously fi					
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		<del></del>			
A corpora Part I only	ttion required to file Form 990-T and requesting an automatic 6-month extension - check this box and con /	nplete	▶ □			
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request at ome tax returns.	exten	sion of time			
noted bel (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consult the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Charities & Nonprofits.	ically if nsolida	(1) you want the additional ated Form 990-T. Instead,			
Type or	Name of Exempt Organization	Emp	loyer identification number			
print	ANGEL FUND FOUNDATION INC.	6	5-1155198			
File by the due date for filing your return See	Number, street, and room or suite no. If a P O. box, see instructions.  1125 N FLAGLER DR					
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions.  W PALM BEACH, FL 33401					
Check ty	pe of return to be filed (file a separate application for each return)					
For	m 990 Form 990-T (corporation) Form 4	720				
For	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5	227				
For	m 990-EZ Form 990-T (trust other than above) Form 6	069				
X For	m 990-PF Form 1041-A Form 8	370				
Teleph  If the c	THOMAS H. HARVEY, III  books are in the care of ▶ 1125 N FLAGLER DR WEST PLAM BEACH, Expressione No ▶ (561)723-7653  FAX No ▶  organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the company of the group, check this box ▶ and attach a list with the names and EINs of all	ıs ıs fo	r the whole group, check this			
	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un <b>AUGUST 15, 2010</b> , to file the exempt organization return for the organization named a precipitation of the organization of time un automatic 3, and ending the second of time under the organization of the org		The extension			
<b>▶</b> [						
▶[	nis tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period			
2 If th	his tax year is for less than 12 months, check reason: Initial return Final return his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
2 If the	his tax year is for less than 12 months, check reason: Initial return Final return his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prefundable credits. See instructions.					
2 If the 3a If the nor b If the	his tax year is for less than 12 months, check reason: Initial return Final return his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any arefundable credits. See instructions.	3a	\$ 86			
2 If the 3a If the norm b If the tax	his tax year is for less than 12 months, check reason: Initial return Final return his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any arefundable credits. See instructions.  his application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.		\$ 86			
2 If th  3a If th  nor  b If th  tax  c Bal	his tax year is for less than 12 months, check reason: Initial return  Final return  is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any irefundable credits. See instructions.  In application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made include any prior year overpayment allowed as a credit.  ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3a	\$ 86			
2 If the second of the second	his tax year is for less than 12 months, check reason: Initial return Final return his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any arefundable credits. See instructions.  his application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.	3a	\$ 86			

Form 8	3868 (Rev. 4-2009)			Page 2				
• If v	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	x		<b>▶</b> X				
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868.					
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).							
Part !! Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).								
Туре	Name of Exempt Organization	Emp	mployer identification number					
print File by t	ANGEL FUND FOUNDATION INC.			65-1155198				
extende due dat filing the	Number, street, and room or suite no. If a P.O. box, see instructions			For IRS use only				
return (	See City, town or post office, state, and ZIP code. For a foreign address, see instructions							
Chec	k type of return to be filed (File a separate application for each return):  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form 8870				
STOP	! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 88	368.				
THOMAS H. HARVEY, III  • The books are in the care of ▶ 1125 N FLAGLER DR WEST PLAM BEACH, FL 33401  Telephone No. ▶ (561)723-7653  FAX No. ▶								
	he organization does not have an office or place of business in the United States, check this box							
		e ie fo	r the whole	group, check this				
box 1				•				
	I request an additional 3-month extension of time until NOVEMBER 15, 2010.							
	For calendar year 2009, or other tax year beginning, and ending							
	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in	accounting period				
7	State in detail why you need the extension							
	ADDITIONAL TIME IS NECESSARY IN ORDER TO GATHER INFORM	ATI	ON SO	THAT A				
	COMPLETE AND ACCURATE TAX RETURN CAN BE FILED.		•					
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
	nonrefundable credits See instructions.	8a	\$	86.				
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	7 %	· · · · · · · · · · · · · · · · · · ·					
	tax payments made. Include any pnor year overpayment allowed as a credit and any amount paid	ž,						
	previously with Form 8868.	8b	\$	86.				
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit							
w	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.				
	Signature and Verification							
Under it is tru	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the le, correct, and <u>ce</u> mplete, a <u>nd</u> that I <u>app</u> authorized to prepare this form.	best o	f my knowle	dge and belief,				
Signat	A = A + A + A + A + A + A + A + A + A +	Date	<b>8</b> -	13-10				

Form **8868** (Rev. 4-2009)